



MISSOURI DEPARTMENT OF AGRICULTURE
DIVISION OF ANIMAL HEALTH
MARKET/SALE LICENSE APPLICATION

PLEASE COMPLETE EACH SECTION ON FRONT AND BACK SIDE OF THIS APPLICATION AND RETURN WITH A CHECK OR MONEY ORDER IN THE AMOUNT OF \$75 MADE PAYABLE TO MISSOURI DEPARTMENT OF AGRICULTURE AND SEND TO: MISSOURI DEPARTMENT OF AGRICULTURE, ANIMAL HEALTH DIVISION, PO BOX 630, JEFFERSON CITY, MISSOURI 65102-0630.

MARKET INFORMATION

NAME OF MARKET/SALE TO APPEAR ON LICENSE		COUNTY WHERE MARKET IS LOCATED
PHONE NUMBER AT MARKET	FAX NUMBER	EMAIL

MAILING INFORMATION (DO NOT PUT PO BOX NUMBER ON ADDRESS WHERE MARKET/SALE IS HELD)

NAME OF FACILITY WHERE MARKET/SALE IS HELD	ADDRESS WHERE MAIL IS TO BE SENT
ADDRESS WHERE MARKET/SALE IS HELD	TO WHOSE ATTENTION
CITY/STATE/ZIP WHERE MARKET/SALE IS HELD	ADDRESS
	CITY/STATE/ZIP

OWNER AND MANAGER INFORMATION

NAME OF MARKET/SALE OWNER	NAME OF MARKET/SALE MANAGER
ADDRESS	ADDRESS
CITY/STATE/ZIP	CITY/STATE/ZIP
PHONE	PHONE

TYPES OF ANIMALS HANDLED

<input type="checkbox"/> CATTLE - WILL HANDLE BRUCELLOSIS REACTORS, SUSPECTS OR EXPOSED	<input type="checkbox"/> EQUINE - WILL HANDLE EIA REACTORS OR EXPOSED
<input type="checkbox"/> CATTLE - WILL NOT HANDLE BRUCELLOSIS REACTORS, SUSPECTS OR EXPOSED	<input type="checkbox"/> EQUINE - WILL NOT HANDLE EIA REACTORS OR EXPOSED
SWINE: INDICATE WHICH CLASS(ES) YOU HANDLE: <input type="checkbox"/> FEEDING <input type="checkbox"/> SLAUGHTER <input type="checkbox"/> BREEDING	<input type="checkbox"/> SWINE - WILL HANDLE PSEUDORABIES REACTORS, SUSPECTS OR EXPOSED <input type="checkbox"/> SWINE - WILL NOT HANDLE PSEUDORABIES REACTORS, SUSPECTS OR EXPOSED
<input type="checkbox"/> SHEEP	<input type="checkbox"/> GOATS <input type="checkbox"/> EXOTICS <input type="checkbox"/> POULTRY

SALE DAYS AND TIMES - PLEASE INDICATE THE DAY AND TIME OF SALE FOR EACH TYPE OF LIVESTOCK THAT IS HANDLED AND NOTE IF THEY ARE WEEKLY, MONTHLY, BI-MONTHLY OR YEARLY

	SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
CATTLE							
FEEDER CALVES							
EQUINE							
BREEDING SWINE							
SLAUGHTER SWINE							
FEEDER PIGS							
SHEEP							
GOATS							
EXOTICS							
POULTRY							

VETERINARIAN INFORMATION: LIST EACH VETERINARIAN & TYPE OF LIVESTOCK THEY WILL BE RESPONSIBLE FOR			
VETERINARIAN(S)			
VETERINARIAN(S)			
BUSINESS INFORMATION			
<input type="checkbox"/> CORPORATION <input type="checkbox"/> PARTNERS/FIRM <input type="checkbox"/> CO-OP <input type="checkbox"/> PRIVATE OWNERSHIP			
NAME OF BUSINESS	ADDRESS	CITY	STATE ZIP
IN WHAT STATE ORGANIZED OR INCORPORATED		DATE ORGANIZED OR INCORPORATED	
PRINCIPAL OFFICE OR PLACE OF BUSINESS			
PRESIDENT'S NAME AND ADDRESS			
VICE-PRESIDENT'S NAME AND ADDRESS			
SECRETARY'S NAME AND ADDRESS			
BOND INFORMATION (SATISFACTORY SURETY MUST BE MAINTAINED AT ALL TIMES) CONFIDENTIAL - FOR OFFICE USE ONLY			
NAME OF BONDING INSTITUTION	BOND NO.	AMOUNT OF BOND	EFFECTIVE DATE
OWNER'S REQUIREMENTS AND RESPONSIBILITIES			
<p>As a market/sale licensee I/we agree to comply with the following regulations:</p> <ol style="list-style-type: none"> 1. Furnish an annual record of each class of animal and total dollar volume per month for the previous 12 months no later than April 15. 2. Publicly post current license. 3. Provide veterinary inspection (if required) of all animals offered for sale. 4. Permit duly authorized representative to review/inspect all phases of the market/sale operation, including but not limited to, facilities, and records. 5. Maintain structurally safe and sanitary conditions in yards, pens, chutes, alleys, facilities, accessory facilities, equipment or premise used in the connection with animals. Disinfect areas as needed. Clean after each sale the facilities and pens used in confinement of small calves, feeding and breeding swine. 6. Prohibit person(s) from altering or substituting testing information on any official form or removing or tampering with or cause the removal of or tampering with any identification required to move the animal interstate, intrastate or through the market/sale. 7. Release no animals from market/sale until all of Missouri or state of destination regulations are met. <p>I futher agree to comply with all animal health laws and regulations pertaining to the movement of animals, animal well-being and procedures used for the control of disease.</p>			
MARKET/SALE OWNER SIGNATURE		DATE	
DISTRICT VETERINARIAN SIGNATURE (NEW MARKET/SALE ONLY)		DATE	
STATE VETERINARIAN APPROVAL SIGNATURE		DATE	